



APPLICATION FOR PERMIT
TO APPROPRIATE PUBLIC WATERS OF THE STATE OF WASHINGTON

☐ SURFACE WATER ☒ GROUND WATER

\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION
(GRAY BOXES FOR OFFICE USE ONLY)

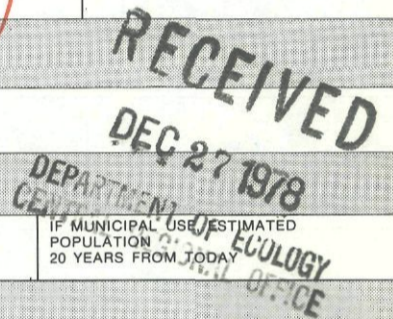
APPLICATION NO. G426093	W.R.I.A. 31	COUNTY Klickitat	PRIORITY DATE 12-27-78	TIME	ACCEPTED MW
APPLICANT'S NAME McBride Ranches, Inc.				BUSINESS TEL. 896-2193	
ADDRESS (STREET) Rt 1 Box 171		(CITY) Bickleton,	(STATE) Washington	(ZIP CODE) 99322	
DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION					

1. SOURCE OF SUPPLY	
IF SURFACE WATER	IF GROUND WATER
SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE)	SOURCE (WELL, TUNNEL, INFILTRATION TRENCH, ETC.) 8 wells
TRIBUTARY	SIZE AND DEPTH 20" x 900' 16" x 850' 14" x 850'

2. USE

USE TO WHICH WATER IS TO BE APPLIED (DOMESTIC SUPPLY, IRRIGATION, MINING, MANUFACTURING, ETC.)

ENTER QUANTITY OF WATER REQUESTED USING UNITS OF:	CUBIC FEET PER SECOND CFS	OR	GALLONS PER MINUTE 7800 GPM	ACRE FEET PER YEAR
TIMES DURING YEAR WATER WILL BE REQUIRED March 1 to October 31 IRRIGATION DURING IRRIGATION SEASON				
IF IRRIGATION, NUMBER OF ACRES 2800	IF DOMESTIC USE, NUMBER OF UNITS BY TYPE, E.G. 1-HOME, 1-MOBILE HOME, 2-CAMPSITES, ETC.		IF MUNICIPAL USE, ESTIMATED POPULATION 20 YEARS FROM TODAY	
DATE PROJECT WAS OR WILL BE STARTED June 1, 1979	DATE PROJECT WAS OR WILL BE COMPLETED June 1, 1985			



3. LOCATION OF POINT OF DIVERSION/WITHDRAWAL

3A. IF IN PLATTED PROPERTY

LOT	BLOCK	OF (GIVE NAME OF PLAT OR ADDITION)	SECTION	TOWN	RANGE	ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION
1 see attached sheet						

3B. IF NOT IN PLATTED PROPERTY

ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER.

ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL.

LOCATED WITHIN (SMALLEST LEGAL SUBDIVISION) See Attached Sheet	SECTION	TOWNSHIP N.	RANGE (E. OR W.) W.M.	COUNTY
--	---------	-------------	-----------------------	--------

4. DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER

5. LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED

ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW.

Sec. 12, NE $\frac{1}{4}$ Sec. 13, SE $\frac{1}{4}$ Sec. 23, S $\frac{1}{2}$ Sec. 24, NE $\frac{1}{4}$ SE $\frac{1}{4}$, Sec. 26, N $\frac{1}{2}$, SE $\frac{1}{4}$ Sec. 25, Sec. 35 ALL in T. 5 N., R. 22 E.

Gov. Lots 1, 2, 3, 4, Sec. 2, T. 4 N., R. 22 E.W.M.

S $\frac{1}{2}$ Sec. 19, Sec. 20, N $\frac{1}{2}$ Sec. 21, W $\frac{1}{2}$, NE $\frac{1}{4}$ Sec. 30, Sec. 29, SW $\frac{1}{4}$ Sec. 28, NW $\frac{1}{4}$ Sec. 31, NE $\frac{1}{4}$ Sec. 34, NE $\frac{1}{4}$, S $\frac{1}{2}$ Sec. 35, ALL in T. 5 N., R. 23 E.W.M., Klickitat County.

WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH THE WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTRACTOR, PURCHASER, ETC.)

Owner

ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDED BY IRRIGATION DISTRICTS OR DITCH COMPANIES.)

☒ YES

☐ NO

IF YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY

G4-24541P, G4-24539P, G4-24538P, G4-25062A, G4-24542A, G4-25439A, G4-24540A

6. DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED

(FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)

REMARKS

7.

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OR MORE AT THE DEEPEST POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, TOGETHER WITH INSTRUCTIONS, FROM THE DEPARTMENT OF ECOLOGY.

SIGNATURES

C. M. Brink

APPLICANT'S SIGNATURE

C. M. Brink

LEGAL LANDOWNER'S SIGNATURE

LEGAL LANDOWNER'S ADDRESS

FOR OFFICE USE ONLY

STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

SS.

This is to certify that I have examined this application together with the accompanying maps and data, and am returning it for correction or completion as follows:

In order to retain its priority date, this application must be returned to the Department of Ecology, with corrections, on or before....., 19.....

Witness my hand this.....day of....., 19.....

Department of Ecology